

DOCKET NO.: 42390P12093

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

TAKASHI KUMAMOTO

Application No.:

09/893,588

Filed:

June 29, 2001

For:

Multi-Purpose

Planarizing/Back-Grind/Pre-Underfill Arrangements for Bumped Wafers and Die Art Group:

2827

Examiner:

A. Chambliss

Date of mailing of PTOL 85 entitled

"Notice of Allowance and Fee(s) Due" June

24, 2004

Confirmation No. 5620

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL OF FORMAL DRAWINGS

Sir:

Enclosed herewith for filing in the above-identified U.S. Patent Application are the formal drawings, 5 sheets including 16 Figures. The three month period of response set in the Notice of Allowability (PTOL 37) expires on September 24, 2004. This submission is on or before this expiration date. Please charge any additional extension or petition fees under 37 C.F.R. §1.17 or credit for any overpayment to our Deposit Account No. 02-2666. A duplicate copy of the Fee Transmittal sheet is enclosed.

Respectfully submitted,

Blakely, Sokoloff, Taylor & Zafman LLP

Dated:

July 30, 2004

Paul A. Mendonsa, Reg. No. 42,879

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CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

07/30/04

Date

AUG 0 3 2004

TOTAL AMOUNT OF PAYMENT

(\$)

RANSMITTAL Complete if Known Application Number 09/893,588 for FY 2004 June 29, 2001 Filing Date Effective 10/01/2004. Patent fees are subject to annual revision. First Named Inventor Takashi Kumamoto A. Chambliss Examiner Name Applicant claims small entity status. See 37 CFR 1.27. 2827 42390P12093 Art Unit

Attorney Docket No.

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METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)						
☐ Check ☐ Credit card ☐ Money ☐ Other ☒ None	3. ADDITIONAL FEES							
_ Order	Large Entity Small Entity							
Deposit Account		Fee	<u> </u>		-			
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Deposit		50	2052	2052 25	Surcharge - late provi	sional filing fee or		
Account Name Blakely, Sokoloff, Taylor & Zafman LLP		400		400	cover sheet.	41		
Name		130 2,520	2053 1812	130 2,520	Non-English specification For filing a request for ex parte reexamination		ation	
The Commissioner is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments		920 *	1804	920 *	Requesting publication of SIR prior to			
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	1251	110	2251	55	Extension for reply within first month Extension for reply within second month			
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1. BASIC FILING FEE	1253	950	2253	475	• •			
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1001 770 2001 385 Utility filing fee	1404	330	2401	165	Notice of Appeal	4 - 5 1		
1002 340 2002 170 Design filing fee	1402	330	2402	165	Filing a brief in suppor	* *		
1003 530 2003 265 Plant filing fee	1403	290	2403	145	Request for oral hearing			
1004 770 2004 385 Reissue filing fee	1451	1,510	2451	1,510	Petition to institute a public use proceeding			
1005 160 2005 80 Provisional filing fee	1452	110	2452	55	Petition to revive - unavoidable			
SUBTOTAL (1) (\$)	1453	1,330	2453	665	Petition to revive - uni			
	1501 1502	1,330	2501	665	Utility issue fee (or rei	ssue)		
2. EXTRA CLAIM FEES Extra Fee from		480	2502	240	Design issue fee			
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Independent 28 - 34 = 0 X 18.00 \$0.00	1460	130	2460	130	Petitions to the Comm			
Claims	1807	50	1807	50	Prosessing fee under 37 CFR 1.17(q) Submission of Information Disclosure Stmt			
	1806	180	1806	180				
Large Entity Small Entity	8021	40	8021	40	Recording each patent assignment per property (times number of properties)			
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	1809	770	1809	385	Filing a submission aft	er final rejection		
1202 18 2202 9 Claims in excess of 20	,,,,,		1000		(37 CFR § 1.129(a))			
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))			
1203 290 2203 145 Multiple Dependent claim, if not paid	4004	770	0004	205	Request for Continued Examination (RCE)			
1204 86 2204 43 **Reissue independent claims over original patent	1801	770	2801	385 900	Request for Continued Examination (RCE)			
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1205 18 2205 9 **Reissue claims in excess of 20 and over original patent	Other fee (specify)							
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**or number previously paid, if greater, For Reissues, see below	*Reduced by Basic Filing Fee Paid			id	SUBTOTAL (3) (\$)			
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SUBMITTED BY	I P.	egistratio	n No				lete (if applicable)	
Name (Print/Type) Paul A. Mendonsa		tomey/Age		4	12,879	Telephone	(503) 439-8778	
Signature & M. M.	-					Date	07/30/04	